CLAIMS ONLY

Application Number	Filing Date
16629112	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1			1				51						
2				1			52						
3							53						
4				1			54						
5			1				55						
6							56						
7				1			57						
8							58						
9							59						
10							60						
11							61						
12				1			62						
13							63						
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44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep			2				Total Indep						
Total Depend			10				Total Depend						
Total Claims			12				Total Claims						